

<div style="font-size: 2em; font-weight: bold; margin-right: 10px;">A</div> CLAIMS ONLY							Application Number <div style="font-size: 1.5em; font-family: cursive;">01061672</div>		Filing Date	
							Applicant(s)			

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend	*		*		*	
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Total Depend	32											
Total Claims	34											

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CLAIMS ONLY								Application Number 10/66/672		Filing Date
								Applicant(s)		
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
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